



BRCA Photo, Video & Media Release Form

ATHLETE INFORMATION

- Athlete Name: _____
- Team: _____
- Date of Birth: _____

PARENT/GUARDIAN INFORMATION

- Parent/Guardian Name: _____
- Phone Number: _____
- Email: _____

PURPOSE

The BRCA Cheer Program may capture photographs and/or video recordings of athletes during practices, games, competitions, and team-related events. These materials may be used for communication, recognition, and promotion of the program.

MEDIA PERMISSION OPTIONS (SELECT ONE)

Please select **ONE** option below:

NO PHOTO / VIDEO PERMISSION

I do **NOT** grant permission for my child to be photographed or recorded.

- My child will not appear in:
 - Team photos
 - Group videos
 - Social media
 - Promotional materials

TEAM USE ONLY (PRIVATE)

I grant permission for my child to appear in photos/videos **for internal team use only**.

Permitted uses:

- Private team communications (email, team apps, shared drives)
- End-of-season events (banquets, slideshows)

NOT permitted:

- Social media



BRCA Photo, Video & Media Release Form

- Public websites
- Marketing or promotional materials

FULL MEDIA RELEASE (INCLUDING SOCIAL MEDIA)

I grant permission for my child to be photographed and/or recorded and for those images/videos to be used by BRCA Cheer Program for:

- Social media platforms (e.g., Instagram, Facebook)
- Program website
- Promotional and marketing materials
- Publications and program content

I understand that once content is shared publicly, BRCA cannot control redistribution or reuse by third parties such as Central Jersey Pop Warner/ Eastern Region Pop Warner/ Nationals Pop Warner

WAIVER & RELEASE OF LIABILITY

I hereby grant BRCA Cheer Program permission to use photographs and/or video recordings of my child for the purposes stated above.

I understand and agree that:

- These materials may be used without compensation
- BRCA retains the right to edit, crop, and publish media as appropriate
- I waive any right to inspect or approve the finished product
- I release and hold harmless BRCA Cheer Program, its coaches, staff, and affiliates from any claims, liability, or damages arising from the use of such media

ACKNOWLEDGEMENT

By signing below, I confirm that:

- I have read and understand this form
- I have selected one media permission option
- I understand I may revoke or change this permission at any time in writing

SIGNATURES

Parent/Guardian Name (Print): _____

Signature: _____ Date: _____